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|-----------------------------|---------------------------------------|--------------|------------------------|--|
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

No S-Y

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

No S-Y

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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|  |   |                        |                       |                            |
|--|---|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR<br>COUNTRY<br>FL                   | SHEETS<br>DRAWING<br>3 | TOTAL<br>CLAIMS<br>20 | INDEPENDENT<br>CLAIMS<br>3 |
| 35 USC 119 (a-d) conditions<br>met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance |   |                        |                       |                            |
| Verified and<br>Acknowledged   | Examiner's Signature<br><i>Sierra Jacob</i> | Initials<br>S-Y        |                       |                            |

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## TITLE

Transducer assembly

|                 |   |   |
|-----------------|---|---|
| FILING FEE      | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                                 |
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